

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000002033

**Entity Name:** CHURCH OF NEW BEGINNINGS NEW BEGINNINGS  
MINISTRIES, INC.

**Current Principal Place of Business:**

505 ALABAMA ROAD SOUTH  
LEHIGH ACRES, FL 33974

**Current Mailing Address:**

PO BOX 1857  
LEHIGH ACRES, FL 33970

**FEI Number:** 65-0407417

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

OUTLAW, WINDFORD REV.  
1412 COLUMBUS AVENUE  
LEHIGH ACRES, FL 33972 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name OUTLAW, WINDFORD PASTOR  
Address 1412 COLUMBUS AVE  
City-State-Zip: LEHIGH ACRES FL 33972

Title VD  
Name OUTLAW, CHRISTINE  
Address 2531 CHARLESTON PARK DRIVE  
City-State-Zip: ALVA FL 33920

Title SD  
Name CHERRY, LUCENDA  
Address 4208 5TH STREET W  
City-State-Zip: LEHIGH ACRES FL 33971

Title TD  
Name CHERRY, JOSEPH  
Address 4208 5TH STREET W  
City-State-Zip: LEHIGH ACRES FL 33971

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LUCENDA CHERRY

**FINANCE SECRETARY**

**04/30/2016**

Electronic Signature of Signing Officer/Director Detail

Date